

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000**

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590 03/03/2004

Robert E. Bushnell
Suite 300
1522 K Street, N.W.
Washington, DC 20005



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Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/836,550	04/18/2001	Deok-Hyeon Choe	P56342	6795

TITLE OF INVENTION: TENSION MASK FOR COLOR CRT, METHOD FOR MANUFACTURING THE TENSION MASK, AND EXPOSURE MASK USED IN THE MANUFACTURE OF THE TENSION MASK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	06/03/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
PATEL, ASHOK	2879	313-403000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Robert E. Bushnell, Esq.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

SAMSUNG SDI CO., LTD.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Suwon-si, Gyeonggi-do, Republic of Korea

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee

A check in the amount of the fee(s) is enclosed.

Publication Fee

Payment by credit card. Form PTO-2038 is attached.

Advance Order - # of Copies _____

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)  (Date) 6/2/04
Robert E. Bushnell, Esq., 27,774

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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06/04/2004 HAL122 00000044 09836550

01 FC:1501 1330.00 OP
02 FC:1504 300.00 OP

TRANSMIT THIS FORM WITH FEE(S)

PATENT
P56342

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

DEOK-HYEON CHOE et al.

Serial No.: 09/836,550

Examiner: PATEL, ASHOK

Filed: 18 April 2001

Art Unit: 2879

For: TENSION MASK FOR COLOR CRT, METHOD FOR MANUFACTURING THE TENSION MASK, AND EXPOSURE MASK USED IN THE MANUFACTURE OF THE TENSION MASK

ISSUE FEE AND PUBLICATION FEE TRANSMITTAL

Mail Stop : ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This transmittal accompanies a signed Issue Fee Transmittal, PTOL-85B, and Applicant's check drawn to the order of the Commissioner of Patents & Trademarks in the amount of U.S. \$1,630.00, including a fee of \$300.00 for Publication Fee.

Respectfully submitted,

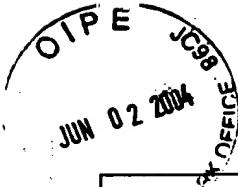


Robert E. Bushnell, Esq.
Reg. No.: 27,774

1522 "K" Street, N.W., Suite 300
Washington, D.C. 20005
(202) 408-9040

Enclosures: Issue Fee Transmittal, PTOL-85B, and check # 45674
Folio: P56342
Date: June 2, 2004
REB/sb





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FEE TRANSMITTAL

Patent fees are subject to annual revision.

Complete If Known

		Application Number	09/836,550				
		Filing Date	18 April 2001				
		First Named Inventor	DEOK-HYEON CHOE et al.				
		Examiner Name	PATEL, ASHOK				
		Group/Art Unit	2879				
TOTAL AMOUNT OF PAYMENT		(\$) <u>1,630.00</u>	Attorney Docket No.		P56342		
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)					
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge ANY DEFICIENCY to:		3. ADDITIONAL FEES					
Deposit Account Number: <u>02-4943</u>		Large Entity	Small Entity				
Deposit Account Number: _____		Fee Code	Fee (\$)	Fee Code	Fee (\$)		
<input type="checkbox"/> Charge Any Additional Fee Required Under 37 C.F.R. §1.16 and 1.17.		1051	130	2051	65	Fee Description	Fee Paid
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		1052	50	2052	25	Surcharge-late filing fee or oath	\$
<input checked="" type="checkbox"/> Payment Enclosed: (CHECK #45674)		1053	130	1053	130	Surcharge-late provisional filing fee or cover sheet	\$
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other		1812	2,520	1812	2,520	Non-English specification	\$
<input checked="" type="checkbox"/> For filing a request for reexamination		1804	920*	1804	920*	For filing a request for reexamination	\$
<input checked="" type="checkbox"/> Requesting publication of SIR prior to Examiner action		1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	\$
<input checked="" type="checkbox"/> Extension for reply within first month		1251	110	2251	55	Extension for reply within first month	\$
<input checked="" type="checkbox"/> Extension for reply within second month		1252	420	2252	210	Extension for reply within second month	\$
<input checked="" type="checkbox"/> Extension for reply within third month		1253	950	2253	475	Extension for reply within third month	\$
<input checked="" type="checkbox"/> Extension for reply within fourth month		1254	1,480	2254	740	Extension for reply within fourth month	\$
<input checked="" type="checkbox"/> Extension for reply within fifth month		1255	2,010	2255	1,005	Extension for reply within fifth month	\$
<input checked="" type="checkbox"/> Notice of Appeal		1401	330	2401	165	Notice of Appeal	\$
<input checked="" type="checkbox"/> Filing a brief in support of an appeal		1402	330	2402	165	Filing a brief in support of an appeal	\$
<input checked="" type="checkbox"/> Request for oral hearing		1403	290	2403	145	Request for oral hearing	\$
<input checked="" type="checkbox"/> Petition to institute a public use proceeding		1451	1,510	1451	1,510	Petition to institute a public use proceeding	\$
<input checked="" type="checkbox"/> Petition to revive - unavoidable		1452	110	2452	55	Petition to revive - unavoidable	\$
<input checked="" type="checkbox"/> Petition to revive - unintentional		1453	1,330	2453	665	Petition to revive - unintentional	\$
<input checked="" type="checkbox"/> Utility issue fee (or reissue)		1501	1,330	2501	665	Utility issue fee (or reissue)	\$1,330.00
<input checked="" type="checkbox"/> Design issue fee		1502	480	2502	240	Design issue fee	\$
Total claims -20** = x =		1503	640	2503	320	Plant issue fee	\$
Independent Claims - 3** = x =		1460	130	1460	130	Petitions to the Commissioner	\$
Multiple Dependent =		1504	300	1504	300	Publication fee for early, voluntary, or normal publication	\$ 300.00
Multiple Dependent =		1806	180	1806	180	Submission of Information Disclosure Statement	\$
* or number previously paid, if greater; For Reissues, see below		8021	40	8021	40	Recording each patent assignment per property (Times number of properties)	\$
Large Entity Small Entity		1809	770	2809	385	Filing a submission after final rejection (37 C.F.R. §1.129(a))	\$
Fee Code (\$)		1810	770	2810	385	For each additional invention to be examined (37 C.F.R. §1.129(b))	\$
Fee Code (\$)		1801	770	2801	385	Request for Continued Examination (RCE)	\$
Fee Code (\$)		8001	3			Printed copy of patent w/o color	\$
Fee Code (\$)		Other Fee (specify) _____					\$
SUBTOTAL (1) (\$) <u>0.00</u>		** Reduced by Basic Filing Fee Paid				SUBTOTAL (3)	\$ <u>1,630.00</u>

SUBMITTED BY

Complete (if applicable)

Typed or Printed Name	Robert E. Bushnell, Esq.			Reg. Number	27,774
Signature		Date	June 2, 2004	Deposit Account User ID	

REB/sb

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